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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/US05/05668 02/22/2005 /CMW/ 8/11/2008
 which claims benefit of 60/546,389 02/20/2004

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and /CHERIE M WOODWARD/ Examiner's Signature		<input type="checkbox"/> Met after Allowance		MA	3	27	4
Acknowledged		Initials					

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TITLE

Diagnosis or treatment of endothelial cell dysfunction related diseases

FILING FEE RECEIVED 805	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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